



COPY

STATE OF ARIZONA
APPLICATION FOR CERTIFICATION
AS A PARTICIPATING CANDIDATE

Pursuant to Arizona Revised Statutes §§16-947 and 948 and AAC R2-20-104 (D)

OFFICE USE ONLY

☒ Initial Application

☐ Amended Application

FILERID
2004-93169

NAME OF CANDIDATE Lori Tapia		OFFICE SOUGHT (include Legislative District, if applicable) State Representative-Dist. 25	
ADDRESS (NUMBER & STREET) 3005 14th Street		CITY Douglas	STATE AZ
MAILING ADDRESS (if different from above)		CITY	STATE
CANDIDATE'S TELEPHONE # 520-364-7330	CANDIDATE'S FAX #	CANDIDATE'S E-MAIL ADDRESS tapialori@aol.com	
CANDIDATE'S PARTY AFFILIATION (if any) Democrat			
NAME OF CANDIDATE'S COMMITTEE Committee to Elect Lori Tapia			
COMMITTEE'S ADDRESS 3005 14th Street		CITY Douglas	STATE AZ
COMMITTEE'S PHONE # 520-364-7330		COMMITTEE'S E-MAIL ADDRESS	
NAME OF DESIGNATED INDIVIDUAL WITH AUTHORITY TO WITHDRAW FUNDS (IF APPLICABLE) (A.R.S. §16-948) Olga Santana			
DESIGNATED INDIVIDUAL'S ADDRESS 1240 5th Street		CITY Douglas	STATE AZ
DESIGNATED INDIVIDUAL'S TELEPHONE # 520-364-2500		DESIGNATED INDIVIDUAL'S E-MAIL ADDRESS	
LIST THE NAME OF THE FINANCIAL INSTITUTION FROM WHICH THE CANDIDATE AND THE DESIGNATED INDIVIDUAL WILL CONDUCT ALL FINANCIAL ACTIVITY FOR THE CANDIDATE'S CAMPAIGN COMMITTEE (do not list account number). (A.R.S. §16-948(A)) Southeastern Arizona Federal Credit Union			

DESIGNATED CANDIDATE'S STATEMENT (if applicable) (A.R.S. §16-948(B)): I hereby designate Olga Santana as my duly authorized Designated Individual, with the authority to withdraw funds and make expenditures from my campaign account on my behalf.

Date: 3-24-04

Candidate's signature: 